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AFFILIATE OFFICES
MUMBAI, INDIA

June 17, 2008

MAIL STOP ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Re:

U.S. Patent Application Serial No. 09/849,967

For: SPLICE CHOICE ANTAGONISTS AS THERAPEUTIC AGENTS

Our Reference: 51230-00601

## Dear Sirs:

Transmitted herewith for filing in the U.S. Patent Office in connection with the above-referenced application are the following documents:

- (1) Transmittal Form (1 sheet);
- (2) Fee Transmittal (1 sheet) (in duplicate); and
- (3) Issue Fee Transmittal (1 sheet) (in duplicate).

Please charge all fees due for this submission to Deposit Account No. 03-2469.

Please date-stamp the enclosed copy of this letter, acknowledging receipt of the above-identified documents, and return it to us.

Sincerely,

JOHN N. COULBY, Reg. No. 43,565

**Enclosures** 

cc:

Stuart Newman

Natalie Bronstein

WASHDOCS/DILLJ/841689.1

PTO/SB/21 (01-08)

Approved for use through 06/30/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/849.967 **TRANSMITTAL** Filing Date May 8, 2001 First Named Inventor **FORM** Stuart A. Newman Art Unit 1642 **Examiner Name** Misook Yu

51230-00601

Attorney Docket Number

(to be used for all correspondence after initial filing)

Signature

Typed or printed name

	111011.55. 5.	rages in this Submission		<u> </u>					
			EN	CLO	วรบ	JRES (Check	all that apply	)	
<b>✓</b>	Fee Tran	nsmittal Form		Dra	awing	ıg(s)			After Allowance Communication to TC
	F	ee Attached		Lice	ensir	ing-related Papers			Appeal Communication to Board of Appeals and Interferences
Amendment/Reply After Final Affidavits/declaration(s)  Extension of Time Request Express Abandonment Request Information Disclosure Statement  Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks		e Address		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):  Issue Fee			
		SIGNA	TURE	OF	ΔF	PPLICANT, ATT	ORNEY. C	R AG	FNT
Firm N	lame	KELLEY DRYE & WARRE			,				
Signati	ure	THE TANK	Z	$\equiv$	Z				
Printed	Printed name JOHN N. COULBY		(			フ <u></u>			
Date		June 17, 2008					Reg. No.	43,56	5
CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with									
sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:									

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Date

PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032

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Complete if Known Fees pursuant to the Consolid iations Act, 2005 (H.R. 4818). 09/849.967 Application Number FEE TRANSMIT Filing Date May 8, 2001 For FY 2008 Stuart A. Newman First Named Inventor **Examiner Name** Misook Yu Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1642 TOTAL AMOUNT OF PAYMENT 1029.00 Attorney Docket No. 51230-00601 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 03-2469 Deposit Account Name: Collier Shannon Scott For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 155 510 210 105 255 210 Design 105 100 130 50 65 Plant 210 105 310 160 80 155 Reissue 310 155 510 255 620 310 Provisional 210 105 0 0 0 0 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 105 Each independent claim over 3 (including Reissues) 210 Multiple dependent claims 370 185 **Total Claims** Multiple Dependent Claims **Extra Claims** Fee Paid (\$) Fee (\$) Fee Paid (\$) - 20 or HP = Fee (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 **Total Sheets** Fee Paid (\$) Fee (\$) / 50 = (round up to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Issue Fee (\$1020): 3 advance copies of patent (\$9) 1029.00

SUBMITTED BY Registration No. 43,565 Telephone 202-342-8400 Signature (Attorney/Agent) Date June 17, 2008 Name (Print/Type) JOHN N. COULBY

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 1029.00

spond to a collection of info	rmation unless it displays a	valid Olvib Control number
	Complete if Known	interior
Application Number	09/849,967	S. D. B.
Filing Date	May 8, 2001	/ 8
First Named Inventor	Stuart A. Newman	JUN 17 2008
Examiner Name	Misook Yu	
Art Unit	1642	Manual
Attorney Docket No.	51230-00601	

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):  Deposit Account Deposit Account Number: 03-2469  Deposit Account Name: Collier Shannon Scott							
For the above-ider	tified deposit	account, the Direc	ctor is hereb				<del></del>
✓ Charge fee(	s) indicated be	elow		Char	ge fee(s) indic	ated below, ex	cept for the filing fee
		(s) or underpayme	ents of fee(s	) Cred	it any overpay	ments	
under 37 Cf لــــــــا WARNING: Information on tl	FR 1.16 and 1. his form may be		lit card inforn	ىت nation should r	ot be included	on this form. P	rovide credit card
information and authorization	n on PTO-2038						
FEE CALCULATION							
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES SEARCH FEES EXAMINATION FEES     Small Entity Small Entity     Small Entity							
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	310	. 155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims  Small Entity Fee (\$) Fee (\$) 25 25 370 185							
Total Claims	Extra Clain	ns Fee (\$)	Fee Pa	aid (\$)		Multiple De	ependent Claims
- 20 or HP =		X	_ =			Fee (\$)	Fee Paid (\$)
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3 or HP =		x	_=				
HP = highest number of ind		paid for, if greater t	han 3.				
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)							
Other (e.g., late filing surcharge): Issue Fee (\$1020); 3 advance copies of patent (\$9) 1029.00							

SUBMITTED BY			
Signature	1 1	Registration No. (Attorney/Agent) 43,565	Telephone 202-342-8400
Name (Print/Type)	JOHN N. COULBY		Date June 17, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

**Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

appropriate. All further	correspondence includi- ed below or directed of	ng the Patent, advance of	rders and notification of r a) specifying a new corres	naintenance fees w spondence address;	ill be mailed to the current and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for		
		lock 1 for any change of address)	Feet	s) Transmittal. This	certificate cannot be used	or domestic mailings of the for any other accompanying ent or formal drawing, must		
3050 K STREE' SUITE 400	YE & WARREN I T, NW	<i>[</i>	I he Stat additran	reby certify that thi es Postal Service w essed to the Mail	ificate of Mailing or Trans s Fee(s) Transmittal is bein ith sufficient postage for fir Stop ISSUE FEE address O (571) 273-2885, on the o	g deposited with the United st class mail in an envelope above, or being facsimile		
WASHINGTON	N, DC 20007	12				(Depositor's name)		
		TRADE	MS -			(Signature)		
<del>_</del>	- <u> </u>					(Date)		
APPLICATION NO.	PPLICATION NO. FILING DATE			FIRST NAMED INVENTOR ATTORNEY DOCKET NO.				
09/849,967	05/08/2001	TA COMOTO A O TUEN	Stuart A. Newman	07 /10 /089	51230-00601 8 ANONDAF2 0000086 0	1338 32469 <b>098499</b> 67		
ITTLE OF INVENTION	N: SPLICE CHOICE AN	TAGONISTS AS THERA	APEUTIC AGENTS			55,03		
				01 FC:250 02 FC:150 03 FC:800	4 300.00 DA			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE		DATE DUE		
nonprovisional	onal YES \$720		\$300	\$0	\$1020	06/19/2008		
EXAM	IINER	ART UNIT	CLASS-SUBCLASS					
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. Change of correspond CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the p					
	ondence address (or Cha	ange of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a					
"Fee Address" ind	lication (or "Fee Address Of or more recent) attach	" Indication form aed. Use of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or typ	pe)				
PLEASE NOTE: Uni	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the part of a substitute for filing an	atent. If an assigne assignment.	e is identified below, the d	document has been filed for		
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CITY	and STATE OR Co	OUNTRY)			
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual Con	poration or other private gr	oup entity Government		
a. The following fee(s)	are submitted:	41		se first reapply an	y previously paid issue fee	shown above)		
Issue Fee XPublication Fee (N	No small entity discount p	permitted)	A check is enclosed.  Payment by credit car	d Form PTO-2038	is attached	•		
Advance Order -			The Director is hereby overpayment, to Depo	authorized to charg sit Account Number	te the required fee(s), any de 03-2469 (enclose a	eficiency, or credit any in extra copy of this form).		
a. Applicant claim	tus (from status indicate is SMALL ENTITY state	is. See 37 CFR 1.27.			L ENTITY status. See 37 C			
NOTE: The Issue Fee an nterest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than the Office.	ne applicant; a regis	tered attorney or agent; or t	he assignee or other party in		
		AFT						
Authorized Signature			<del>)                                    </del>	Date Jur	ne 17, 2008			

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Typed or printed name

JOHN N. COULBY

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